

STAFF CHECKLIST FOR TRANSMITTAL OF RECORDS/INFORMATION

EPA-R6- 2017-000123

	YES	NO	N/A
Program has responsive records	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Searched all possible locations (hard copy/e-mail, Files in workstation, file rooms, hard/flash/shared drives, CDs, blackberries etc.)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Advised RFO/DFC of any special circumstances/ Sensitivity related to the FOIA Request	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Consulted with the FOIA Requester and/or RFO/DFC For further clarification of the request	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Completed "Certification of Adequate Search" form for "No Records" Response	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Completed Cost Sheet	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Provided responsive records to the assigned FOIA Specialist by due date on transmittal form	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Date: <u>11/22/16</u> Signature: <u>[Signature]</u> Ext. <u>5-8074</u>			
Printed Name: <u>Evan L. Pearson</u> Office Name: <u>CRC</u>			

COMMENTS: _____

**THIS FORM SHOULD BE COMPLETED AND RETURNED TO THE REGIONAL
 FOI OFFICER ALONG WITH THE RESPONSIVE RECORDS, A COST SHEET AND
 "NO RECORDS" CERTIFICATION FORM (IF NECESSARY), FOR EACH FOIA
 REQUEST PROCESSED.**

INTERNAL USE ONLY – DO NOT SEND THIS TO REQUESTER

Please read instructions on back before completing form.

FOIA FEE CALCULATION WORK SHEET

1. REQUEST NUMBER EPA-R6- 2017-000123	2. TYPE OF REQUESTER Commercial	3. DATE COMPLETED 11/22/16	4. ACTION OFFICE
<p>NOTE: The Freedom of Information Act and EPA's regulations state that the Federal Government must obtain a fee commitment from a FOIA requester before billing can occur. So if no fee commitment is plainly given in the request letter or if other Divisions also have records, please contact the requester. Provide the requester with an estimate. Make sure the requester understands what program records you refer to and make a note of his/her fee commitment.</p>			
5. FEE COMMITMENT AMT		6. DATE OF VERBAL/WRITTEN COMMITMENT	7. FEE COMMITMENT RECEIVED FROM
8. CLERICAL PERSONNEL		TOTAL HRS	¼ HOUR RATE COST
a. Search - \$4.00 @ ¼ HOUR			x \$4.00 =
b. Review - \$4.00 @ ¼ HOUR			x \$4.00 =
9. PROFESSIONAL PERSONNEL		TOTAL HRS	¼ HOUR RATE COST
a. Search - \$7.00 @ ¼ HOUR		1	x \$7.00 = 28.00
b. Review - \$7.00 @ ¼ HOUR		2	x \$7.00 = 56.00
10. MANAGERIAL PERSONNEL		TOTAL HRS	¼ HOUR RATE COST
a. Search - \$10.25 @ ¼ HOUR			x \$10.25 =
b. Review - \$10.25 @ ¼ HOUR			x \$10.25 =
11. DUPLICATION/REPRODUCTION		TOTAL	RATE OR ACTUAL COST
a. Paper or Computer Page (2 sided copy = 2 copies)			x \$.15 pg =
b. Diskette or CD (Specify 3 CD's, 1 CD etc.)			x \$ 1.00 each =
c. Microfiche			x \$ 1.00/sheet =
d. Microfilm			x \$10.00/cartridge =
e. Video or Audio Cassette (Specify)			x \$5.00/each =
f. Maps			
g. Photos			
12. OTHER COSTS		TOTAL	RATE OR ACTUAL COST
a. Computer Cost			x =
b. Certifications			x \$25.00 =
c. Special Handling – Overnight Mail			x =
d. Other			x =
13. ACTUAL ADMIN. COST FOR NON-BILLABLE STAFF TIME		TOTAL	¼ HOUR RATE COST
a. Preparer's Name: _____ Grade/Step: _____			x =
b. Preparer's Name: _____ Grade/Step: _____			
14. FOR FOIA OFFICE USE ONLY			
a. TOTAL ADMINISTRATIVE/PROCESSING FEES _____		c. TOTAL CHARGED _____	
b. TOTAL COLLECTABLE FEES _____		d. FEES WAIVED/REDUCED YES OR NO	